

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: SYSTEM FOR PREPARATION OF A
SOLUTION AND USE OF THE
SOLUTION
Attorney Docket Number:: 48266-61462CIP
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure::
Total Drawing Sheets:: 11
Small Entity?: No
Latin Name::
Variety Denomination Name::
Petition Included?: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?:

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDISH
Status:: Full Capacity
Given Name:: Kjell
Middle Name::
Family Name:: EKBERG
City of Residence:: Vaxholm
State or Province of Residence::
Country of Residence:: Sweden
Street of Mailing Address:: Vasterskogen 2
S-185 94 Vaxholm, Sweden
City of Mailing Address:: Vaxholm
State or Province of Mailing Address::
Country of Mailing Address:: Sweden
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDISH
Status:: Full Capacity
Given Name:: Sudhir
Middle Name::
Family Name:: CHOWDHURY
City of Residence:: Farsta
State or Province of Residence::
Country of Residence:: Sweden
Street of Mailing Address:: Vidjavigen 53
S-123 53 Farsta, Sweden
City of Mailing Address:: Farsta
State or Province of Mailing Address::
Country of Mailing Address:: Sweden
Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This applicatio	Continuation-in-part of	09/623,834	11/17/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	9800751-1	3/9/98	Yes

Assignment Information

Assignee Name:: Otre Ab

Street of Mailing Address:: S-171 77

City of Mailing Address:: Solna

State or Province of Mailing Address::

Country of Mailing Address:: Sweden

Postal or Zip Code of Mailing Address::